NAME (Last, First, Middle Initial)	SOCIAL SECURITY NUMBER		REGISTER NUMBER	
ELIG FOR PAROLE	DATE APPLIED	DATE OF PAROL		DATE FINAL RELEASE
	DATE MAILED		DATE RETURNED	
EMPLOYMENT AGREEMENT				
STATEMENT OF PAROLE ADVISOR				
	DATE INITIATED		DATE CANCELLED	
FBI FORM 1 - 12				
REMARKS (Parole, Suspended, Revoked, Other)				

DA FORM 1702-R, FEB 72 EDITION OF 1 JAN 70 WILL BE USED. PAROLE OFFICER'S REFERENCE DATA
For use of this form, see AR 190-47; the proponent agency is PMG. APD V1.01